

County of Los Angeles CHIEF EXECUTIVE OFFICE

713 KENNETH HAHN HALL OF ADMINISTRATION LOS ANGELES, CALIFORNIA 90012 (213) 974-1101 http://ceo.lacounty.gov

May 6, 2008

The Honorable Board of Supervisors County of Los Angeles 383 Kenneth Hahn Hall of Administration 500 West Temple Street Los Angeles, CA 90012

Dear Supervisors:

Board of Supervisors GLORIA MOLINA First District

YVONNE B. BURKE Second District

ZEV YAROSLAVSKY Third District

DON KNABE Fourth District

MICHAEL D. ANTONOVICH Fifth District

DEPARTMENT OF PUBLIC HEALTH: APPROVAL OF NOTICE OF COOPERATIVE AGREEMENT FROM THE CENTERS FOR DISEASE CONTROL AND PREVENTION FOR THE HIV/AIDS SURVEILLANCE PROJECT (ALL SUPERVISORIAL DISTRICTS)

(3 VOTES)

SUBJECT

Approval to accept a Notice of Cooperative Agreement (NCA) for the Human Immunodeficiency Virus (HIV)/Acquired Immunodeficiency Syndrome (AIDS) Surveillance Program to support the HIV/AIDS Surveillance Project.

IT IS RECOMMENDED THAT YOUR BOARD:

- Approve and instruct the Director of the Department of Public Health (DPH), or his
 designee, to accept and execute the attached NCA Number 1U62PS001045-01
 (Exhibit I) from the Centers for Disease Control and Prevention (CDC) to support
 the HIV/AIDS Surveillance Project, in the amount of \$1,911,400 (75 percent of the
 total anticipated award) for Calendar Year (CY) 2008.
- 2. Delegate authority to the Director of DPH, or his designee, to: 1) accept the remaining 25 percent of CDC's CY 2008 base award in an amount not to exceed \$637,133; and 2) accept and execute subsequent NCAs similar to NCA Number 1U62PS001045-01 from CDC, to support the HIV/AIDS Surveillance Project for CYs 2009 through 2012, contingent upon the availability of CDC funds and subject to review and approval by County Counsel and the Chief Executive Office and notification to the Board offices.

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> 3. Delegate authority to the Director of DPH, or his designee, to accept and execute amendments to the NCAs for CYs 2008 through 2012 to accept rollover funds, and/or to increase or decrease funding up to 25 percent of each CY's base award, subject to review and approval by County Counsel and the Chief Executive Office and notification to the Board offices.

PURPOSE/JUSTIFICATION OF RECOMMENDED ACTION

Approval of the recommended actions will allow DPH to accept grant funds from CDC to support the HIV/AIDS Surveillance Project. Under this grant award, various salaries and employee benefits, equipment, supply, and travel costs associated with the HIV/AIDS Surveillance Project will be funded.

The continuation of federally funded HIV/AIDS surveillance services provide for Core Surveillance, Incidence Surveillance and Variant Atypical and Resistant HIV Surveillance (VARHS) projects that inform local County and community-based organizations that provide HIV prevention and care services throughout Los Angeles County. HIV/AIDS surveillance staff report prevalence and incidence for cases of HIV and AIDS diagnosed at medical care facilities and HIV testing sites throughout the County.

FISCAL IMPACT/FINANCING

The total program cost for CY 2008 is \$2,548,533. NCA Number 1U62PS001045-01 represents 75 percent (\$1,911,400) of the CDC approved award for CY 2008, with the remaining 25 percent (\$637,133) forthcoming upon approval of a federal appropriation bill.

Funding for this program is included in DPH's Fiscal Year (FY) 2007-08 Final Adopted Budget, the FY 2008-09 Proposed Budget, and will be requested in future FYs, as necessary.

There is no net County cost associated with this action.

FACTS AND PROVISIONS/LEGAL REQUIREMENTS

The HIV Epidemiology Program has been collecting continuous surveillance data on HIV-infected persons in Los Angeles County since 2002, and on persons diagnosed with AIDS since 1982.

Since 2004, your Board has approved and DPH has accepted financial assistance from CDC to support HIV/AIDS Surveillance projects, including Incidence Surveillance, as part of the HIV/AIDS Surveillance Grant, U62CCU923576, in effect from 2004 through 2007.

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On December 20, 2007, CDC notified DPH's HIV Epidemiology Program that it had been awarded funding to monitor the prevalence and incidence of HIV, and the prevalence of atypical and resistant HIV strains in Los Angeles County. Under this NCA, DPH's HIV Epidemiology Program will continue to perform HIV/AIDS Surveillance and HIV Incidence Surveillance while expanding services to include surveillance of variant, atypical and resistant strains of HIV.

The overall goal of these projects is to maintain and supplement an existing HIV/AIDS surveillance system for the purpose of monitoring long-term trends in the prevalence and incidence of HIV/AIDS and the prevalence of resistant HIV strains in Los Angeles County.

County Counsel has approved Exhibit I as to form.

Attachment A is the Grant Management Statement for grants exceeding \$100,000.

IMPACT ON CURRENT SERVICES (OR PROJECTS)

These grant funds will allow DPH's HIV Epidemiology Program to continue the HIV/AIDS Surveillance Project, which it has conducted since 1982, and expand surveillance to include variant, atypical and resistant strains of HIV.

CONCLUSION

When approved, Department of Public Health requires four signed copies of your Board's action.

Respectfully submitted,

WILLIAM T FUJIOKA Chief Executive Officer

WTF:SRH:SAS MLM:RTM:yb

Attachments (2)

c: County Counsel
Director and Health Officer, Department of Public Health

050608_DPH_HIV



Notice of Award

Issue Date: 03/13/2008

COOPERATIVE AGREEMENTS Department of Health and Human Services Centers for Disease Control

NATIONAL CENTER FOR HIV. VIRAL HEPATITIS, STDS AND TB PREVENTION



Grant Number: 1U62PS001045-01 REVISED

Principal Investigator(s): DOUGLAS M FRYE

Project Title: HIV/AIDS SURVEILLANCE

BUSINESS OFFICIAL LOS ANGELES DEPARTMENT OF PUBLIC HEALTH 600 S. COMMONWEALTH AVE. **SUITE 1920** LOS ANGELES, CA 90005

Budget Period: 01/01/2008 - 12/31/2008 Project Period: 01/01/2008 - 12/31/2012

Dear Business Official:

The Centers for Disease Control hereby revises this award (see "Award Calculation" in Section I and "Terms and Conditions" in Section III) to LOS ANGELES DEPARTMENT OF PUBLIC HEALTH in support of the above referenced project. This award is pursuant to the authority of 307,317K2 PHSA,42USC241,247BK2,PL108 and is subject to the requirements of this statute and regulation and of other referenced, incorporated or attached terms and conditions.

Acceptance of this award including the "Terms and Conditions" is acknowledged by the grantee when funds are drawn down or otherwise obtained from the grant payment system.

If you have any questions about this award, please contact the individual(s) referenced in Section IV.

Sincerely yours.

Merlin Williams

Grants Management Officer Centers for Disease Control

Additional information follows

SECTION I - AWARD DATA - 1U62PS001045-01 REVISED

Award Calculation (U.S. Dollars)	
Salaries and Wages	\$1,021,322
Fringe Benefits	\$483,660
Personnel Costs (Subtotal)	\$1,504,982
Equipment	\$3,000
Supplies	\$38,651
Travel Costs	\$21,600
Other Costs	\$95,669
Consortium/Contractual Cost	\$60,799
Federal Direct Costs	\$1,724,701
Federal F&A Costs	\$186,699
Approved Budget	\$1,911,400

AMOUNT OF THIS ACTION (FEDERAL SHARE)

TOTAL FEDERAL AWARD AMOUNT

\$0

\$1,911,400

\$1,911,400

Recommended future year total cost support, subject to the availability of funds and satisfactory progress of the project.

02	\$2,548,533
03	\$2,548,533
04	\$2,548,533
05	\$2,548,533

Federal Share

Fiscal Information:

CFDA Number:

93.944

EIN:

1956000927A1

Document Number:

UPS001045A

IC	CAN	2008	2009	2010	2011	2012
PS	9212466	\$1,098,315	\$2,548,533	\$2,548,533	\$2,548,533	\$2,548,533
PS	9213799	\$387,864				
PS	9213823	\$140,971				
PS	921Z0GQ	\$3,000				
PS	921Z3ZM	\$281,250				

SUMMARY TOTALS FOR ALL YEARS			
YR	THIS AWARD	CUMULATIVE TOTALS	
1	\$1,911,400	\$1,911,400	
2	\$2,548,533	\$2,548,533	
3	\$2,548,533	\$2,548,533	
4	\$2,548,533	\$2,548,533	
5	\$2,548,533	\$2,548,533	

Recommended future year total cost support, subject to the availability of funds and satisfactory progress of the project

CDC Administrative Data:

PCC: / OC: 4151

SECTION II - PAYMENT/HOTLINE INFORMATION - 1U62PS001045-01 REVISED

For payment information see Payment Information section in Additional Terms and Conditions.

INSPECTOR GENERAL: The HHS Office Inspector General (OIG) maintains a toll-free number (1-800-HHS-TIPS [1-800-447-8477]) for receiving information concerning fraud, waste or abuse under grants and cooperative agreements. Information also may be submitted by e-mail to

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hhstips@oig.hhs.gov or by mail to Office of the Inspector General, Department of Health and Human Services, Attn: HOTLINE, 330 Independence Ave., SW, Washington DC 20201. Such reports are treated as sensitive material and submitters may decline to give their names if they choose to remain anonymous. This note replaces the Inspector General contact information cited in previous notice of award,

SECTION III - TERMS AND CONDITIONS - 1U62PS001045-01 REVISED

This award is based on the application submitted to, and as approved by, CDC on the above-titled project and is subject to the terms and conditions incorporated either directly or by reference in the following:

- a. The grant program legislation and program regulation cited in this Notice of Award.
- b. The restrictions on the expenditure of federal funds in appropriations acts to the extent those restrictions are pertinent to the award.
- c. 45 CFR Part 74 or 45 CFR Part 92 as applicable.d. The HS Grants Policy Statement, including addenda in effect as of the beginning date of the budget period.
- e. This award notice, INCLUDING THE TERMS AND CONDITIONS CITED BELOW.

This award is funded by the following list of institutes. Any papers published under the auspices of this award must cite the funding support of all institutes.

National Center For Hiv, Viral Hepatitis, Stds And To Prevention (PS)

Treatment of Program Income: Additional Costs

SECTION IV - PS Special Terms and Conditions - 1U62PS001045-01 REVISED

Funding Opportunity Announcement Number (FOA): PS08-802 Award Number: 1 U62 PS001045-01 Revised (1) Approval List Number: CM020008 TERMS AND CONDITIONS NOTE 1. The purpose of this amendment (1) is to correct organization's name to reflect as Los Angeles Department of Public Health. NOTE 2. All other terms and conditions issued with the original award remain in effect throughout the budget period unless otherwise changed, in writing, by the Grants Management Officer.

Funding Opportunity Announcement Number (FOA): PS08-802

Award Number: U62PS001045-01 Approval List Number: C0033R08

ADDITIONAL TERMS AND CONDITIONS OF THIS AWARD

Note 1. INCORPORATION: Funding Opportunity Announcement Number PS08-802 titled, "HIV/AIDS Surveillance," as amended, additional requirements; the application dated September 28, 2007, the budget discussion bewteen Doug Frye and CDC (Merlin Williams and Don Mixon), and revised budget dated November 30, 2007 are made a part of this award by reference.

Note 2. RESPONSE TO SUMMARY STATEMENT/STRUCTURAL REVIEW FORM: NA

Note 3. APPROVED FUNDING:

We are operating under a continuing resolution and as a result the total available funding for the FY 2008 twelve month budget period (January 1, 2008 through December 31, 2008), is contingent on the approval of the appropriation bill. Your anticipated 12 month budget amount is \$2,548,533 Financial Assistance (FA).

This award reflects 75% of your anticipated total 12 month budget for the Financial Assistance (FA).

Therefore, the amount of \$1,911,400 in FA is awarded in the following components.

Core \$1,101,315 Incidence \$387,864 Capacity Building \$0 VARHS \$140,971 Core Surv NBR \$281,250

Note 4. INDIRECT COSTS: Indirect costs are approved based on the Indirect Cost Rate Agreement dated May 25, 2007, which calculates indirect costs as follows: a provisional is approved at a rate of 18.28% of the base, which includes: Salaries and wages.

Note 5. PROGRAM INCOME: Any program income generated under this cooperative agreement will be used in accordance with the additional cost alternative. The disposition of program income must have written prior approval from the Grants Management Officer.

Additional Costs Alternative—Used for costs that are in addition to the allowable costs of the project for any purposes that further the objectives of the legislation under which the cooperative agreement was made. General program income subject to this alternative shall be reported on lines 10r and 10s, as appropriate, of the FSR (Long Form).

Note 6. REPORTING REQUIREMENTS:

a.) Annual Financial Status Report (FSR, SF 269 or SF 269A): The FSR for this budget period is due to the Grants Management Specialist by March 31, 2009. Reporting timeframe is January 1, 2008 through December 31, 2008. The FSR should only include those funds authorized and actually expended during the timeframe covered by the report. If the FSR is not finalized by the due date, an interim FSR must be submitted, marked "not" final, and an amount of unliquidated obligations should be annotated to reflect unpaid expenses. Electronic versions of the form can be downloaded into Adobe Acrobat and completed on-line by visiting: http://www.whitehouse.gov/omb/grants/sf269a.pdf.

b.) Progress Reporting:

INTERIM PROGRESS REPORT (IPR): The IPR will serve as the non-competing continuation application and must be submitted via grants.gov. The IPR includes progress of the project and a detailed budget. The reporting timeframe is January 1, 2008 – June 30, 2008. A specific due date and guidance will be published on grants.gov at a later time.

Note: The CDC is required by the Department of Health and Human Services (HHS) to receive applications through www.Grants.boy. If you encounter any difficulties submitting your progress report through www.Grants.goy, please contact CDC's Technical Information Management Section at (770) 488-2700 prior to submission deadline.

ANNUAL PROGRESS REPORT (APR): The APR is due March 31, 2009. Additional guidance may be provided. Reporting timeframe is January 1, 2008 – December 31, 2008.

Note 7. HIV PROGRAM REVIEW PANEL REQUIREMENT: All written materials, audiovisual materials, pictorials, questionnaires, survey instruments, websites, educational curricula and other relevant program materials have to be reviewed and approved by an established program review panel. A list of reviewed materials and approval dates must be submitted to the CDC Grants Management Specialist.

Note 8. CORRESPONDENCE: <u>ALL</u> correspondence (including emails and faxes) regarding this award must be dated, <u>identified with the AWARD NUMBER</u> as shown at the top left of this page,

and include a point of contact (name, phone, fax, and email). All correspondence should be addressed to the Grants Management Specialist.

Note 9. PRIOR APPROVAL: All requests, which require prior approval, must bear the signature of an authorized official of the business office of the grantee organization as well as the principal investigator or program or project director named on this notice of award. The request must be postmarked no later than 120 days prior to the end date of the current budget period. Any requests received that reflect only one signature will be returned to the grantee unprocessed. Additionally, any requests involving funding issues must include an itemized budget and a narrative justification of the request.

Prior approval is required but is not limited to the following types of requests: 1) Use of unobligated funds from prior budget period (Carryover); 2) Lift funding restriction, withholding, or disallowance, 3) Redirection of funds, 4) Change in Contractor/Consultant; 5) Supplemental funds; 6) Response to Technical Review, or 7) Change in Key Personnel.

Note 10. KEY PERSONNEL: In accordance with 45 CFR Part 92, CDC recipients shall obtain prior approval from CDC for (1) Change in the project director or principal investigator or other key persons specified in the application or award document, and (2) the absence for more than three months, or a 25 percent reduction in time devoted to the project, by the approved project director or principal investigator.

Note 11. INVENTIONS: Acceptance of grant funds obligates recipients to comply with the "standard patent rights" clause in 37 CFR 401.14.

Note 12. PUBLICATIONS: Publications, journal articles, etc. produced under a CDC grant support project must bear an acknowledgment and disclaimer, as appropriate, such as:

'This publication (journal article, etc.) was supported by the Cooperative Agreement Number above from The Centers for Disease Control and Prevention. Its contents are solely the responsibility of the authors and do not necessarily represent the official views of the Centers for Disease Control and Prevention."

Note 13, CONFERENCE DISCLAIMER AND USE OF LOGOS:

<u>Disclaimer</u>: Where a conference is funded by a grant or cooperative agreement, a subgrant or a contract the recipient must include the following statement on conference materials, including promotional materials, agenda, and Internet sites:

"Funding for this conference was made possible (in part) by the cooperative agreement award number above from the Centers for Disease Control and Prevention. The views expressed in written conference materials or publications and by speakers and moderators do not necessarily reflect the official policies of the Department of Health and Human Services; nor does mention of trade names, commercial practices, or organizations imply endorsement by the U.S. Government"

Logos: Neither the HHS nor the CDC logo may be displayed if such display would cause confusion as to the source of the conference or give the false appearance of Government endorsement. A non-federal entity's unauthorized use of the HHS name or logo is governed by U.S.C. 1320b-10, which prohibits the misuse of the HHS name and emblem in written communication. The appropriate use of the HHS logo is subject to the review and approval of the Office of the Assistant Secretary for Public affairs (OASPA). Moreover, the Office of the Inspector General has authority to impose civil monetary penalties for violations (42 C.F.R. Part 1003). Neither the HHS nor the CDC logo can be used

on conference materials, under a grant, cooperative agreement, and contract or co-sponsorship agreement without the expressed, written consent of either the Project Officer or the Grants Management Officer. It is the responsibility of the grantee (or recipient of funds under a cooperative agreement) to request consent for the use of the logo in sufficient detail to assure a complete depiction and disclosure of all uses of the Government logos, and to assure that in all cases of the use of Government logos, the written consent of either the Project Officer or the Grants Management Officer has been received.

Note 14. EQUIPMENT AND PRODUCTS: To the greatest extent practicable, all equipment and products purchased with CDC funds should be American-made. CDC defines equipment as Tangible non-expendable personal property (including exempt property) charged directly to an award having a useful life of more than one year AND an acquisition cost of \$5,000 or more per unit. However, consistent with recipient policy, a lower threshold may be established. Please provide the information to the Grants Management Officer to establish a lower equipment threshold to reflect your organization's policy.

Note 15. ACKNOWLEDGMENT OF FEDERAL SUPPORT: When issuing statements, press releases, requests for proposals, bid solicitations and other documents describing projects or programs funded in whole or in part with Federal money, all awardees receiving Federal funds, including and not limited to State and local governments and recipients of Federal research grants, shall clearly state (1) the percentage of the total costs of the program or project which will be financed with Federal money, (2) the dollar amount of Federal funds for the project or program, and (3) percentage and dollar amount of the total costs of the project or program that will be financed by nongovernmental sources.

Note 16. INSPECTOR GENERAL: The HHS Office Inspector General (OIG) maintains a toll-free number (1-800-HHS-TIPS [1-800-447-8477]) for receiving information concerning fraud, waste or abuse under grants and cooperative agreements. Information also may be submitted by e-mail to https://mail.nih.gov or by mail to Office of the Inspector General, Department of Health and Human Services, Attn: HOTLINE, 330 Independence Ave., SW, Washington DC 20201. Such reports are treated as sensitive material and submitters may decline to give their names if they choose to remain anonymous. This note replaces the Inspector General contact information cited in previous notice of award.

Note 17, PAYMENT INFORMATION:

Automatic Drawdown

Payment under this award will be made available through the Department of Health and Human Services (HHS) Payment Management System (PMS). PMS is administered by the Division of Payment Management, Program Support Center, HHS. PMS will forward the <u>DHHS Manual for Recipients Financed Under the Payment Management System (PMS)</u>, PMS-270 and PMS-272 forms.

- a. PMS correspondence, mailed through the U.S. Postal Service, should be addressed as follows: Division of Payment Management, FMS/PSC/HHS, P.O. Box 6021, Rockville, MD 20852.
- b. If a carrier other than the U.S. Postal Service is used, such as United Parcel Service, Federal Express, or other commercial service, the correspondence should be addressed as follows: Division of Payment Management, FMS/PSC/HHS, Rockwall Building #1, Suite 700, 11400 Rockville Pike, Rockville, MD 20852.

To expedite your first payment from this award, attach a copy of the Notice of Grant/Cooperative Agreement to your payment request form.

Note 18. AUDIT REQUIREMENT: An organization that expends \$500,000 or more in a year in Federal awards shall have a single or program-specific audit conducted for that year in accordance with the provisions of OMB Circular A-133, Audit of States, Local Governments, and Non-Profit Organizations. The audit must be completed along with a data collection form, and the reporting package shall be submitted within the earlier of 30 days after receipt of the auditor's report(s), or nine months after the end of the audit period. The audit report must be sent to: Federal Audit Clearing House, Bureau of the Census, 1201 East 10th Street, Jeffersonville, IN 47132. Should you have questions regarding the submission or processing of your Single Audit Package, contact the Federal Audit Clearinghouse at: (301) 763-1551, (800) 253-0696 or email: govs.fac@census.gov.

The grantee is to ensure that the sub-recipients receiving CDC funds also meet these requirements (if total Federal grant or cooperative agreement funds received exceed \$500,000). The grantee must also ensure that appropriate corrective action is taken within six months after receipt of the sub-recipient audit report in instances of non-compliance with Federal law and regulations. The grantee is to consider whether sub-recipient audits necessitate adjustment of the grantee's own accounting records. If a sub-recipient is not required to have a program-specific audit, the Grantee is still required to perform adequate monitoring of sub-recipient activities. The grantee is to require each sub-recipient to permit independent auditors to have access to the sub-recipient's records and financial statements. The grantee should include this requirement in all sub-recipient contracts.

Note 19, CDC CONTACT NAMES:

Business and Grants Policy Contact

Ms. Merlin J. Williams, Grants Management Specialist Centers for Disease Control, PGO, Branch 1 2920 Brandywine Road, Mail Stop E-15 Atlanta, GA 30341-4146 Telephone: (404) 639-8052

Fax: (404) 639-8095 Email: mqw6@cdc.gov

Programmatic and Technical Contact

Don Mixon, Project Officer
Centers for Disease Control and Prevention
Division HIV/AIDS Prevention
8 Corporate Blvd., Mail Stop E47
Atlanta, GA 30329
Telephone: (404) 639-4108

Fax: (404) 639-2980 Email: dxm4@cdc.gov STAFF CONTACTS
Grants Management Specialist: Merlin Williams
Center for Disease Control and Prevention (CDC)
Procurment and Grants Office
2920 Brandywine Road, MS E-15

Atlanta, GA 30341

Phone: (404) 639-8052 Fax: (404) 639-8095

Grants Management Officer: Merlin Williams Center for Disease Control and Prevention (CDC) Procurment and Grants Office 2920 Brandywine Road, MS E-15 Atlanta, GA 30341

Phone: (404) 639-8052 Fax: (404) 639-8095

SPREADSHEET SUMMARY

GRANT NUMBER: 1U62PS001045-01 REVISED

INSTITUTION: LOS ANGELES COUNTY HEALTH SERVICES DEPT

Budget	Year 1	Year 2	Year 3	Year 4	Year 5
Salaries and	\$1,021,322				
Wages			_		
Fringe Benefits	\$483,660				
Personnel Cost	s\$1,504,982				
(Subtotal)					
Equipment	\$3,000				
Suppli es	\$38.651				
Travel Costs	\$21,600				
Other Costs	\$95,669				
Consortium/Co tractual Cost	n\$60,799				
TOTAL FEDERAL DC	\$1,724,701	\$2,548,533	\$2,548,533	\$2,548,533	\$2,548,533
TOTAL FEDERAL F&A	\$186,699				
TOTAL COST	\$1,911,400	\$2,548,533	\$2,548,533	\$2,548,533	\$2,548,533

Los Angeles County Chief Executive Office Grant Management Statement for Grants Exceeding \$100,000

Department: Public Health HIV Epidemiology Program					
Grant Project Title and Description Notice of Cooperative Agreement from the Centers for Disease Control and Prevention to support the HIV/AIDS Surveillance Project					
Funding Agency Centers for Disease Control & Prevention	Program (Fed. Grant #State Bill or Code #) Notice of Cooperative Agreement Grant Number 1U62PS001045-01 Grant Acceptance Deadline				
Total Amount of Grant Funding	ng: \$1,911,400	County Match Requi	rements: N/A		
Grant Period: 01/01/08-12/31	1/12	Begin Date: 01/01/20	008 End Date: 12/31/2008		
Number of Personnel Hired L	Inder this Grant:	Full Time 0 F	Part Time 0		
Obliga	tions Imposed on the C	ounty When the Grant	Expires		
Will all personnel hired for this program be informed this is a grant funded program? Yes ⊠ No □					
Will all personnel hired for this program be placed on temporary "N" items? Yes ⊠ No □					
Is the County obligated to continue this program after the grant expires Yes ☐ No ⊠					
If the County is not obligated to continue this program after the grant expires, the Department will:					
a). Absorb the program cost without reducing other services Yes ☐ No ⊠					
b). Identify other revenue sources					
(Describe)					
c). Eliminate or reduce, as appropriate, positions/program costs funded by this grant Yes X No					
Impact of additional personnel on existing space: None					
Other requirements not mentioned above: None					
Department Head Signature Date 4-16-68					